

06 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2006 8:00 am
Secretary of State

03-10-2006 90010 037 ****61.25

DOCUMENT #712580 1. Entity Name 252 JEFFERSON CONDOMINIUM, INC.					
Principal Place of Business 252 JEFFERSON AVE APT 3 MIAMI BCH, FL 33139			Mailing Address 318 OCEAN DRIVE 207 MIAMI BCH, FL 33139		
2. Principal Place of Business		3. Mailing Address Frank Management Services, Inc. c/o Frank Bianco, Manager			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 1840 Coral Way, #4-195		01272006 Chg-NP CR2E037 (11/05)	
City & State Miami, FL		City & State Miami, FL		4. FEI Number 59-1235171	
Zip 33145		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KLETZENBAUER, HERI 918 OCEAN DRIVE #207 MIAMI, FL 33139			7. Name and Address of New Registered Agent Name MICHAEL C. GONGORA, ESQ. Street Address (P.O. Box Number is Not Acceptable) Becker & Pollakoff, P.A. 121 Alhambra Plaza, 10th Floor City Coral Gables FL Zip Code 33134		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title is acceptable Michael C Gongora 2/21/06 (NOTE: Registered Agent signature required when reappointing) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME TAMCSIN, ROBERT STREET ADDRESS 252 JEFFERSON AVE. #3 CITY-ST-ZIP MIAMI BEACH, FL 33139	☒ Delete		TITLE Director at Large NAME De Souza, Wagner STREET ADDRESS 252 Jefferson Ave., #9 CITY-ST-ZIP Miami Beach, FL 33139	☒ Change ☐ Addition	
TITLE VPD NAME MIKKELSEN, CHRISTIAN STREET ADDRESS 252 JEFFERSON AVENUE #5 CITY-ST-ZIP MIAMI, FL 33139	☒ Delete		TITLE VPD NAME Vaubourg, Danielle STREET ADDRESS 252 Jefferson Ave., #12 CITY-ST-ZIP Miami Beach, FL 33139	☒ Change ☐ Addition	
TITLE STD NAME GOMEZ, LUISA STREET ADDRESS 252 JEFFERSON AVE #2 CITY-ST-ZIP MIAMI, FL 33139	☒ Delete		TITLE TD NAME Derrick, Lori STREET ADDRESS 252 Jefferson Ave., #11 CITY-ST-ZIP Miami Beach, FL 33139	☒ Change ☐ Addition	
TITLE T NAME DERRICK, LORI STREET ADDRESS 252 JEFFERSON AVE # 11 CITY-ST-ZIP MIAMI BEACH, FL 33139	☒ Delete		TITLE SD NAME Gomez, Luisa STREET ADDRESS 252 Jefferson Ave., #2 CITY-ST-ZIP Miami Beach, FL 33139	☒ Change ☐ Addition	
TITLE T NAME MARCUS, ROCHELLE STREET ADDRESS 2319 EAST 23RD STREET CITY-ST-ZIP BROOKLYN, NY 11229	☒ Delete		TITLE P NAME Bart, George STREET ADDRESS 252 Jefferson Ave., #8 CITY-ST-ZIP Miami Beach, FL 33139	☒ Change ☐ Addition	
TITLE D NAME DE SOUSA, WAGNER STREET ADDRESS 252 JEFFERSON AVENUE CITY-ST-ZIP MIAMI BEACH, FL 33139	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE GEORGE BART (PRESIDENT) 3/6/06 305 7987630 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone					